State of New Jersey
Department of Community Affairs
Bureau of Code Services
P.O Box 808
Trenton, New Jersey 08625-0808
Phone (609) 292-2097

APPLICATION FOR AMENDED TYPE CERTIFICATION

THIS APPLICATION IS TO BE COMPLETED BY
THE RIDE MANUFACTURER
Must have a Type Certification to complete this application

Page 1 of 1

		<u> </u>
MANUFA	ACTURER:	
RIDE NA	ME:	MODEL
ТҮРЕ СЕ	RTIFICATION #:	
MAILING ADDRESS:		Phone: ()
		Cell: ()
CONTRAC	TE DED GOM	Fax: ()
CONTACT PERSON:		 Email:
EN	GINEERING REQUIREMENTS FOR	AMENDED TYPE CERTIFICATION:
 □ A copy of the original Type Certification issued by the Department; □ All supplemental safety bulletins, safety alerts, or notifications issued following the issuance of the original type certification; □ One set of design calculations for the amendment, and it's effect on original calculations, compliant with N.J.A.C. 5:14A-7, signed and sealed by a licensed professional engineer; □ One set of drawings for the amendment, compliant with N.J.A.C. 5:14A-7, signed and sealed by a licensed professional engineer; □ Documentation to indicate the differences between the information submitted in support of the original type certification and that provided with this application; □ The reason of the modifications; □ List of serial numbers that will be covered by this application; □ \$200 application fee, MAKE CHECK PAYABLE TO: TREASURER, STATE OF N.J. □ Engineering review fee :One percent of the cost of modifications [minimum of \$100 and maximum of \$3000], MAKE CHECK PAYABLE TO: TREASURER, STATE OF N.J. □ Documents not marked as proprietary shall be considered public record 		
	SIGNATURE	TITLE
	PRINT	DATE